Express Mail: EM111720876US PTO/SB/22 (01-08)

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<u> </u>	the paperwork reduction Act of 1995, no persons are to		Τ			
A THE POTO	ON FOR EXTENSION OF TIME UNDER FY 2008	Docket Number (Optional) REB/001 DIV				
<del></del>	ursuant to the Consolidated Appropriations A					
Application	Number 10/696,258	Filed October 28, 2003				
For APPARATUS FOR TREATING HEMORRHOIDS AND SIMILAR AILMENTS						
Art Unit 41	53	Examiner Jordan J. Smith				
This is a re application	equest under the provisions of 37 CFR 1.136	δ(a) to extend the period	d for filing a reply i	n the above identified		
The reques	sted extension and fee are as follows (check	k time period desired ar	nd enter the appro	priate fee below):		
		Fee Sn	nall Entity Fee			
$\boxtimes$	One month (37 CFR 1.17(a)(1))	<b>\$12</b> 0	\$60	\$60.00		
	Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$		
	Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$		
	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$		
	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$		
Applicant claims small entity status. See 37 CFR 1.27.						
A check in the amount of the fee is enclosed.						
Payment by credit card. Form PTO-2038 is attached.						
The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>06-1075</u> . I have enclosed a duplicate copy of this sheet.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
I am the	applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
attorney or agent of record. Registration Number						

April 14, 2008 Date Adam M. Kaplan 212-596-9000

Typed or printed name

attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 59,109.

00000046 061075

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<del>[6,4</del>2008 |

Express Mail: EM111720876US PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known Effective on 12/08/2004. e pictuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/696,258 RANSMITTAL Filing Date October 28, 2003 For FY 2008 First Named Inventor Rebecca Gomez **Examiner Name** Jordan J. Smith ns small entity status. See 37 CFR 1.27 Applicant of Art Unit 4153 TRADE REB/001 DIV TOTAL AMOUNT OF PAYMENT (e)180 00 Attorney Docket No.

TOTAL AMOUNT OF TA	TIME IV	(\$) 100.00		ney bocket No.	TILDIOO	1 017	<del></del>	_
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 06-1075  Deposit Account Name: Ropes & Gray LLP							_	
For the above-ider	ntified deposit a	account, the Dir	ector is hereby au	uthorized to: (che	ck all that apply	)		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
	Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments							
WARNING: Information on t information and authorization	his form may be	ecome public. Cr	edit card informati		• •	form. Provide cred	iit card	
FEE CALCULATION							,	
1. BASIC FILING, SEA	ARCH, AND	EXAMINATIO	N FEES					
	FILING F		SEARCH F		EXAMINA	TION FEES		
Application Type	<u>S</u> Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	310	155	510	255	210	105	rees raid (\$)	
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FE	EES					<u>s</u>	mall Entity	
Fee Description						<u>Fee (\$)</u>	Fee (\$)	
Each claim over 20 (in						50	25	
Each independent clain Multiple dependent cla		luding Reissu	es)			210	105	
Total Claims	ıms Extra Clai	me Foo	(\$) Fees Pa	id (\$)		370 Multiple Depe	185	
11 - 20 or HF		× 25	= 0	<u></u>		Fee (\$)	Fee Paid (\$)	
HP = highest number of total	claims paid for, if	greater than 20						
Indep. Claims	Extra Clai		(\$) Fees Pa	id (\$)				
2 - 3 or HP	<del></del>	<u> </u>	= 0					
HP = highest number of indep	·	aid for, if greater t	han 3					
3. APPLICATION SIZE		re avegad 100	sheets of naner	(avaludina ala	atronically fil	ad saguanca ar	computer	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
sheets or fraction t					o. 5a 0	,, • • • • • • • • • • • • • • • • •		
Total Sheets	Extra Sheets	Num	ber of each addi	tional 50 or frac		Fee (\$)	Fee Paid (\$)	
- 100 = /50= (round up to a whole number) x =								
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)						Fee Paid (\$)		
Other (e.g., late filing surcharge): Information Disclosure Statement						\$180.00		
		,						_

SUBMITTED BY	. /		
Signature	Salens Karb	Registration No. 59,109 (Attorney/Agent)	Telephone 212-596-9000
Name (Print/Type	Adam M. Kaplan		Date April 14, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.